



Needham Public Health Department

1471 Highland Avenue, Needham, MA 02492 781-455-7500 ext. 511
www.needhamma.gov/health 781-455-0892 (fax)



Application for an Addition to a House on a Septic System

Fee

Make check payable to
Town of Needham/Health
Department

1. Address: _____

Name of Owner: _____ Phone _____

Owner's Address (if different) _____

2. Builder's Name _____ Phone _____

3. Current Septic System (check all that apply):

☐ Cesspool ☐ Septic Tank size _____ ☐ Leach Pit

☐ Leach Line ☐ Leach Trench ☐ Unknown

☐ Ever Inspected? ☐ Yes ☐ No Date Inspected? _____

Inspected by _____ Phone _____

Is the system located in Wellhead Protection Zone II? ☐ Yes ☐ No ☐ Unknown

4. Is sewer available on this street? ☐ Yes ☐ No ☐ Unknown

Distance to nearest sewer connection: _____ feet on _____ Street(s)
(Please submit a written cost estimate from the Water and Sewer/Engineering Dept. on cost of sewer connection.)

5. House at Present Number of Bedrooms _____ Total Number of Rooms _____
(Total number of rooms excludes bathrooms, hallways and unheated storage rooms.)

6. Please give a brief description of the planned addition: _____

7. Signature of Owner or Contractor _____ Date _____

Questions? Call the Environmental Health Agent at the Health Department at 781-455-7523.

For Health Department use only: Date completed _____
Checklist

☐ Check for required fee made out to Town of Needham

☐ Copy of proposed building plans

☐ Copy of plot plan clearly showing location of system

Change in footprint? 310 CMR 15.301 (2)
Change in number of bedrooms 310 CMR 15.002 & 15.301
Design flow for current system

Foot: Y N Sewer: Y N

_____ → _____

_____ gpd _____ bedrooms

☐ with grinder?